



SFW 2157

PTO/SB/21 (09-04)

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

11

Application Number

09/866,226

Filing Date

May 24, 2001

First Named Inventor

Katsuragi, Eiju

Art Unit

2157

Examiner Name

Ramy M. Osman

Attorney Docket Number

16869S-027400US

**ENCLOSURES (Check all that apply)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form                             | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input type="checkbox"/> Fee Attached                                     | <input type="checkbox"/> Licensing-related Papers   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                       | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application                               | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                        | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address                 | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                        | <input type="checkbox"/> Terminal Disclaimer  | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):         |
| <input type="checkbox"/> Express Abandonment Request                      | <input type="checkbox"/> Request for Refund   | Return Postcard   |
| <input type="checkbox"/> Information Disclosure Statement                 | <input type="checkbox"/> CD, Number of CD(s) _____  |   |
|   | <input type="checkbox"/> Landscape Table on CD  |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)           | <b>Remarks</b> The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. |   |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application   |   |   |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	George B. F. Yee		
Date	June 8, 2006	Reg. No.	37,478

**CERTIFICATE OF TRANSMISSION/MAILING**

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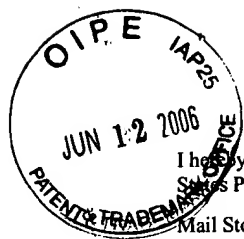
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Date

June 8, 2006



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On \_\_\_\_\_

6/8/06

TOWNSEND and TOWNSEND and CREW LLP

By: \_\_\_\_\_

PATENT

Attorney Docket No.: 16869S-027400US

Client Ref. No.: E5978-01 EX

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Eiju KATSURAGI, et al.

Application No.: 09/866,226

Filed: May 24, 2001

For: METHOD AND SYSTEM FOR  
STORING DUPLICATE DATA

Customer No.: 20350

Confirmation No. 5895

Examiner: Ramy M. Osman

Technology Center/Art Unit: 2157

AMENDMENT

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed March 28, 2006, please enter the following amendments and remarks:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 10 of this paper.